

Medical Care Advisory Committee (MCAC)

Monday, March 9, 2020

10:00am – 12:00 pm

NH Hospital Association, Room 1

125 Airport Road, Concord NH

MINUTES

MEMBERS/ALTERNATES

Present:

Leslie Aronson, Michael Auerbach, Gina Balkus, Kathleen Bates, Sai Cherala, Jay Couture, Diana DeDousis, Lisa DiMartino, Tamme Dustin, Amy Girouard, Ellen Keith, Peter Marshall, Dawn McKinney, Paula Minnehan, Sarah Morrison, Kara Nickulas, Ken Norton, Marie-Elizabeth Ramas, Nancy Rollins, Karen Rosenberg, Jonathan Routhier, Jake Berry, Carolyn Virtue, Michelle Winchester, Jim Zibailo

Excused: Ronnieann Rakoski, Mel Spierer

DHHS: Henry Lipman, Alyssa Cohen, Sarah Finne, Leslie Melby, Wendi Aultman, Doug Osterhoudt

Guests: Sarah Urquhart (WSHP), Stephanie Dahlberg (ACNH), Christina Shepard and Scott Wellman (NHHF), Scott Westover (AmeriHealth), Laura (IHPP) Rich Segal (McLane),

Announcements

Katie Dunn, former Medicaid Director, passed away after her courageous battle with brain cancer. Katie was highly regarded for her many contributions throughout her career. As Medicaid Director for ten years, Katie oversaw reforms, including the transition to managed care, development of the Children's Health Insurance Program and the state's Medicaid Expansion program. A celebration of Katie's life is scheduled for March 14, 11am, Unitarian Universalist Church, 274 Pleasant St, Concord.

Diana Dedousis is retiring from home care and therefore resigning from MCAC. C Virtue thanked Diana for her many contributions to the MCAC and for her steadfast advocacy.

REVIEW/APPROVAL – MINUTES – February 10, 2020

Motion/Second

Corrections: page 1, paragraph 5

Amend the last sentence to read:

"Members stated the level and type of training required should be defined to assure it is sufficient to determine and authorize NF level of care reviews."

Page 3 paragraph 7:

Add the sentence at the end: *" Amend the last sentence to read:*

"Members stated the level and type of training required should be defined to assure it is sufficient to determine and authorize NF level of care reviews."

Page 3 paragraph 7:

Add the sentence at the end: *"C Virtue added the CFI Case Managers provide the same function."*

Motion to approve amendments/seconded.

M/S/A as amended.

MCO Housing Coordinators, Sarah Urquhart, WSHP; Stephanie Dahlberg, ACNH, Christina Shepard and Scott Wellman, NHHF

The MCO Housing Coordinators support MCO members' housing needs.

S Dahlberg (ACNH) works with members and providers and advocates for housing policy, programs and initiatives statewide. The MCOs collaborate with one another on housing.

C Shepard (NHHF) works with members who are homeless and/or at risk of losing housing. The affordable housing shortage in NH continues to be a problem.

S Wellman (NHHF) described the impact of the lack of secure and dependable housing. Housing coordinators assist members with programs for which they are eligible.

Sarah Urquhart (WSHP) emphasized the need to provide outreach and connect members to social resources.

HB 4 provides \$5 million for expanded supportive housing services. Anyone aware of a member's housing needs should contact the MCOs. N Rollins raised concerns that MCOs are creating redundancy of what community organizations are doing to provide housing supports.

H Lipman explained that MCO housing support is part of managing financial risk. Local care management agencies play a major role in integrating the MCOs' care management function. DHHS, IHPP, and Milliman are working on compensation for this purpose. The MCO contract also includes innovative housing measures e.g., no NH Hospital discharges to homeless shelters. A presentation on directed (passthrough) payments for DD and mental health was offered.

S Westover of ACNH noted that community providers closest to members should direct efforts with MCO housing coordinators to assist. H Lipman added that DHHS is committed to localizing these functions.

Long Term Supports and Services, Wendi Aultman

• **Commissioner's Long Term Care (LTC) Workgroup**

W Aultman shared details on the formation of the Workgroup:

- On February 13, 2020, Governor Sununu announced the formation of the Commissioner's Long Term Care Workgroup to work on how services are delivered to seniors in New Hampshire.
- The Commissioner's goal is to assemble the brightest and most innovative minds in the industry who can think about our system of care, rather than just the individual parts.
- The Commissioner anticipates that the workgroup will meet at least monthly for about a year.
- The first meeting will be the first week in April.
- Invitations were sent to individuals this past week. The workgroup has broad representation, including but not limited to sectors from the Department, AARP, Alliance for Healthy Aging, New Hampshire Hospital Association, Counties, Nursing Facilities, Assisted Living Facilities, ADSPs, Commission on Aging, Case Management, etc.

C Virtue shared the following response from Commissioner Shabinette regarding her inquiry about MCAC representation on the Workgroup:

My goal in choosing workgroup members was based on the need for members to be progressive thinkers that can look at the systems caring for seniors as a whole, and not the individual parts....that is the reason I chose Nancy [Rollins]. Although many of our provider organizations and advocacy groups are represented on the workgroup, the selection was based on individual attributes more than the organizations/affiliations they work within.

Once the list is available, the membership of the Workgroup will be sent to MCAC.

- **He-E 802, Nursing Facility Services: Skilled Medical Professionals**

DLTSS is recommending the following definition for skilled medical professional, in line with the RSA and waiver: "Skilled medical professional" shall have the same meaning as "skilled professional medical personnel" in RSA 151-E:3,II: Skilled professional medical personnel employed by or designated to act on behalf of the department shall determine clinical eligibility in accordance with the criteria in subparagraph I(a). The clinical eligibility determination shall be based upon an assessment tool, approved by the department, performed by skilled professional medical personnel employed by the department, or by an individual with equivalent training designated by the department. The department shall train all persons performing the assessment to use the assessment tool. For the purposes of this section, "skilled professional medical personnel" shall have the same meaning as in 42 C.F.R. section 432.50(d)(1)(ii).

DHHS contractor, Keypro, employs RNs who meet state requirements to conduct initial assessments.

M Winchester suggested that the qualifications of the person who denies eligibility should be in line with insurers.

C Virtue proposed the 801 subcommittee review He-E 802.

- **He-P 601, Certified Other Qualified Agencies**

The 601 rule expired last year when only one provider was certified. The rule will be readopted as soon as possible because it focuses on self-direction of personal care. There is no change from the expired rule. This interim rule goes to JLCAR Mar 27. Regular rulemaking will follow.

Eligibility Requirements: CFI Recipients Transitioning to Nursing Facilities, Dawn Landry

Per CMS, if a person was on CFI prior to 2017 and has a community spouse, DHHS must review for spousal impoverishment and establish legally liable county. If transitioning, only required to indicate the facility; and lookback is not reviewed. C Virtue noted that applicants are required to complete the 800 form. D Landry to follow up. Add to April 13 agenda.

MEAD: Awaiting information from Disability Determination Unit.

MOAD: SPA filed for July 1, 2020 implementation

Department Updates, Henry Lipman

Medicaid to Schools. The regular rule has been adopted. The Governor signed SB 684, *relative to Medicaid to Schools*. Stakeholder engagement meetings are continuing. OPLC issued a second guidance document. DHHS is working with CMS for administrative claiming component.

Adult Dental Benefit, Dr. Sarah Finne. The Adult Dental Benefit Working Group is continuing to meet as they work on cost estimates of various plans and covered benefits.

SB 754, *establishing a dental benefit under the state Medicaid program*, passed by the Senate HHS committee; Senate to vote this week. The bill specifies the Working Group's next steps:

- Commissioner to issue Request for Information (RFI) by August 1, 2020.
- Steps to carve-out benefit to be provided by a dental managed care organization.
SB 754 is silent on a carve-in whereby MCOs provide the benefit as part of their contracts.
- Submit SPA to CMS by November 1, 2020.
- Implementation April 1, 2021.

For updates, see <https://www.dhhs.nh.gov/ombp/medicaid/hb692/index.htm> .

K Bates asked how the dental needs of people with disabilities will be met. According to Dr. Finne, the group is reviewing the provider network vis a vis special needs clients, to include providers with appropriate training and facilities.

Funds requested include the 3.1% rate Increase; comparability to other states' rates, administration and premium tax.

Disability Determinations Statistics. The Katie Beckett program will be updated to modify the standards that up to now have been based on the type of in-home care available when Katie Beckett was adopted decades ago. A Girouard is concerned that children who should receive services are not eligible. The DDU is working on strategies to overcome nursing staff shortages, including, but not limited to: increased recruitment, contracting, and training.

Questions to take back to DHHS:

- Are delays due to a staffing problem with the UMass contract?
- Define "ready for nurse write-up."
- Is the number of adults *pending with Medicaid coverage* a subset of all adults pending?
- Explain "consultative exams."
- What are the number of denials for adults and children?

2020/2021 Membership, Jonathan Routhier, Vice Chair

Members whose terms are up will be contacted to determine their interest to continue on MCAC. MCAC bylaws do not specify term limits. Efforts will be made to ensure meaningful electronic access for meetings.

Electronic Visit Verification (EVV)

N Rollins referred to the Feb 10 minutes re: EVV and Mercer Consulting support of EVV. W Aultman explained that Mercer is coordinating with DHHS on readiness and stakeholder engagement. The EVV system will work with existing systems.

Action Items:

- Send definition of Skilled Medical Professional to MCAC. *Completed March 10, 2020.*
- Follow-up transition of waiver recipients - April 13 agenda.
- Send list of Commissioner's Long Term Care Workgroup when available.
- Follow-up re: disability determination questions noted above.